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Chairman: Taku Nagao

Abstracts

Committee

Masamitsu Iino	(Grad. School of Med., The Univ. of Tokyo)
Kunio Ishii	(Kitasato Univ., School of Pharm. Sci.)
Hideaki Karaki	(Grad. School of Agri. & Life Sci., The Univ. of Tokyo)
Koichiro Kawashima	(Kyoritsu Coll. Pharmacy)
Norio Matsuki	(Grad. School of Pharm. Sci., The Univ. of Tokyo)
Miwa Misawa	(Hoshi Univ., School of Pharmacy)
Masayoshi Mishina	(Grad. School of Med., The Univ. of Tokyo)
Hideki Ono	(Fac. Pharm. Sci., Science Univ. of Tokyo)
Shingo Yano	(Grad. School of Pharm. Sci., Chiba Univ.)

Secretariat

Tetsuro Urushidani

**Laboratory of Pharmacology and Toxicology
Graduate School of Pharmaceutical Sciences
The University of Tokyo**

Tokyo, 113-0033

Phone: 03-5841-4860

Fax: 03-5841-4867

Email: toxicol@mol.f.u-tokyo.ac.jp

O-145

In vivo effects of BQ-788 on ET_B receptor-mediated pressor and depressor responses
Megumu Okada, Miyuki Fukushima, Rumi Nakao and Masaru Nishikibe. Banyu Pharmaceutical Co., Ltd., Tsukuba 300-2611, Japan.

We previously reported that the acute antihypertensive effects of mixed ET_A/ET_B antagonists were superior to those of ET_A -selective antagonists in hypertensive rats. In addition, it has been reported that BQ-788, an ET_B antagonist, reduces the efficacy of BQ-123, an ET_A antagonist, *in vivo*. To investigate the physiological effects of ET_B receptors on blood pressure, BQ-788 (3mg/kg/hr), BQ-123 (10mg/kg/hr) and J-104132, an ET_A/ET_B antagonist (3mg/kg/hr), were used. In Dahl salt-sensitive rats, BQ-123 alone decreased MAP by -13 mmHg, while BQ-788 alone increased MAP by +23mmHg. The maximal depressor effect of both compounds combined was similar to that of BQ-123 alone (-13 mmHg). However, the depressor effect of J-104132 (MAP: -25 mmHg) was greater than that of BQ-123 combined with BQ-788. BQ-788 completely inhibited the S6C-induced depressor response but did not affect the pressor response. In contrast, J-104132 completely inhibited S6C-induced depressor and pressor responses. These results suggest that, at least *in vivo*, the effects of BQ-788 as an ET_B antagonist should be interpreted more carefully because BQ-788 is more sensitive to the ET_B -mediated depressor response than to the pressor response.

O-146

Involvement of reduction of PAI-1 in beneficial effects of perindopril on prevention of stroke.
Sachiko Moriyama, Yutaka Ishigai, Tomohiro Mori, Akiko Fukuzawa, Toshiro Shibano, and Hideo Kubo. New Product Research Laboratories II, Daiichi Pharmaceutical Co., Ltd. Tokyo 134-8630, Japan

Plasma plasminogen activator inhibitor-1 (PAI-1) would participate in coronary thrombotic process in patients with myocardial infarction. However, the role of PAI-1 in stroke has not been clarified. The present study was designed to examine whether plasma PAI-1 activity is enhanced in SHRSP with high salt loading. We also investigated whether PAI-1 activity is affected by treatments with anti-hypertensive drugs including perindopril. SHRSPs were continuously subjected to 1% NaCl intake and divided into seven groups (control, perindopril 2 mg/kg/day, propranolol 100 mg/kg/day, nicardipine 20 mg/kg/day, hydralazine 50 mg/kg/day, hydrochlorothiazide 100 mg/kg/day and losartan 50 mg/kg/day). Two weeks after treatments with these drugs, systolic blood pressure decreased in the group with hydralazine, nicardipine or perindopril. However, other three drugs did not affect blood pressure. Plasma PAI-1 activity in the control SHRSPs was significantly higher compared with that in WKYs, and it was lowered by losartan, hydralazine or perindopril. There was no correlation between plasma PAI-1 activity and blood pressure. These results suggest that PAI-1 contributes to the thrombotic process in stroke. In addition, the reduced of PAI-1 activity is not fully explained by hypotension alone. The beneficial effects of perindopril in stroke would be due to, at least in part, the reduction of PAI-1 activity.

O-147

Effect of long-term treatment with L-158809, a novel angiotensin II receptor (AT_1R) antagonist, on function of periaarterial nerves in spontaneously hypertensive rats (SHR) Akira Nakatsuma¹, Hiromu Kawasaki¹, Yuji Kurwaki¹, Hiroaki Araki², and Yutaka Gomita² 1)Clinical Pharmaceutical Science, Faculty of Pharmaceutical Science, Okayama University 2)Department of Hospital Pharmacy, Okayama University, Okayama 7000-8530, JAPAN

We have reported that long-term treatment with AT_1R antagonist, candesartan, reduced vasoconstriction mediated by sympathetic adrenergic nerves. In the present study, the effect of long-term treatment of a novel AT_1R antagonists (L-158809) and angiotensin converting enzyme (ACE) inhibitor, temocapril, on the function of periaarterial nerves was investigated in SHR. Male SHR (8-week-old) was received 0.001% and 0.005% L-158809 or 0.005% temocapril in drinking water for 8 weeks. At 16 weeks of age, blood pressure was measured and isolated mesenteric vascular bed was prepared for perfusion. Mean blood pressure in SHR was significantly lowered by the long-term treatment with L-158809 and temocapril. In the preparation treated by L-158809, periaarterial nerve stimulation (PNS; 4, 8 and 12Hz) induced-vasoconstriction was significantly smaller than that in non-treated SHR. However, L-158809 and temocapril had no changes in release of norepinephrine (NE) by PNS. The vasoconstriction induced by bolus infusion of NE was significantly smaller than that in non-treated SHR. In preparation with active tone produced by guanethidine and methoxamine, PNS caused a frequency-dependent vasodilation mediated by CGRP nerves. Treatment with temocapril but not L-158809 (0.005%) increased the PNS-induced vasodilation. These results suggest that long-term treatment with L-158809 and temocapril reduces adrenergic vasoconstriction and temocapril enhances relaxation mediated by CGRP nerve.

O-148

Antihypertensive effects of endothelin (ET) and angiotensin II AT_1 receptor antagonists in several types of hypertensive rats
Rumi Nakao, Michihiro Saito, Takanori Ikeda, Hisashi Ohta, Megumu Okada, Peter KS Siegl* and Masaru Nishikibe. Banyu Pharmaceutical Co. Ltd., Tsukuba 300-2611, Japan and *Merck Research Laboratories, PA, USA.

The acute antihypertensive effects of J-104132, an ET_A/ET_B antagonist and losartan, an AT_1 antagonist, were characterized in several types of hypertensive rats. J-104132 did not affect blood pressure in normotensive rats (WKY and Dahl salt-resistant rats). Although J-104132 significantly decreased blood pressure in SHR and SHRSP, its antihypertensive effects were not as potent as those of losartan. In Dahl salt-sensitive rats and DOCA-salt rats, J-104132 markedly reduced blood pressure. In these models, losartan did not induce significant reductions in blood pressure. However, losartan had a remarkable antihypertensive effect in a renovascular hypertensive model (2-kidney, 1-clip); J-104132 had no depressor effect in this model. The antihypertensive actions of both J-104132 and losartan persisted until 24 hours after dosing in these models. These results suggest that ET receptor antagonists could be useful in the treatment of volume-dependent and/or salt-sensitive hypertensive patients who are insensitive to renin-angiotensin inhibitors.